

<b>Case Number:</b>	CM15-0202472		
<b>Date Assigned:</b>	10/19/2015	<b>Date of Injury:</b>	10/29/2012
<b>Decision Date:</b>	12/01/2015	<b>UR Denial Date:</b>	10/06/2015
<b>Priority:</b>	Standard	<b>Application Received:</b>	10/15/2015

### HOW THE IMR FINAL DETERMINATION WAS MADE

MAXIMUS Federal Services sent the complete case file to an expert reviewer. He/she has no affiliation with the employer, employee, providers or the claims administrator. He/she has been in active clinical practice for more than five years and is currently working at least 24 hours a week in active practice. The expert reviewer was selected based on his/her clinical experience, education, background, and expertise in the same or similar specialties that evaluate and/or treat the medical condition and disputed items/Service. He/she is familiar with governing laws and regulations, including the strength of evidence hierarchy that applies to Independent Medical Review determinations.

The Expert Reviewer has the following credentials:

State(s) of Licensure: Massachusetts

Certification(s)/Specialty: Physical Medicine & Rehabilitation, Pain Management

### CLINICAL CASE SUMMARY

The expert reviewer developed the following clinical case summary based on a review of the case file, including all medical records:

The injured worker is a 47 year old male, who sustained an industrial injury on 10-29-2012. The injured worker is undergoing treatment for acute exacerbation of chronic back pain, right trapezius strain, depression, anxiety, lumbar disc disorder, neck pain and thoracic pain. Medical records dated 8-25-2015 indicate the injured worker complains of flare up of back pain after dropping a fork. He reports he took Norco and Flexeril at night with 25% decrease in pain. Exam dated 8-13-2015 the treating physician indicates, "there is no rhyme or reason regarding his pain, some days he does feel great and other days simple things such as bending and twisting can aggravate it." Exam dated 7-14-2015 indicates a flare up while in bed with "no one insinuating event that brought it on." The treating physician indicates "patient is taking a Flexeril and Norco every night since his flare last week." Physical exam dated 8-25-2015 notes decreased painful lumbar range of motion (ROM). Treatment to date has included cyclobenzaprine HCL, Cymbalta and Norco. The original utilization review dated 10-6-2015 indicates the request for Retrospective: Toxicology - Urine Drug Screen (DOS: 08/25/2015) is non-certified.

### IMR ISSUES, DECISIONS AND RATIONALES

The Final Determination was based on decisions for the disputed items/services set forth below:

**Retrospective: Toxicology - Urine Drug Screen (DOS: 08/25/2015): Overturned**

**Claims Administrator guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Drug testing. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG).

**MAXIMUS guideline:** Decision based on MTUS Chronic Pain Medical Treatment 2009, Section(s): Opioids, criteria for use. Decision based on Non-MTUS Citation Official Disability Guidelines (ODG) (1) Pain (Chronic): Opioids, screening tests for risk of addiction & misuse (2) Pain (Chronic): Urine drug testing (UDT).

**Decision rationale:** The claimant sustained a cumulative trauma work injury with date of injury in October 2012 and is being treated for chronic low back pain. When seen pain was rated at 3/10. He was taking Norco at night on a regular basis with a 25% decrease in pain and improved sleep. Physical examination findings included a body mass index over 34. There was decreased and painful lumbar range of motion. Straight leg raising was negative. Urine drug screening was requested. Prior urine drug screening is not reported. Criteria for the frequency of urine drug testing include risk stratification. In this case, the claimant appears to be at low risk for addiction/aberrant behavior. Patients at low risk of addiction/aberrant behavior should be tested within six months of initiation of therapy and on a yearly basis thereafter. In this case, there is no urine drug screening result over the previous 12 months and the request was medically necessary.